01- R-1852

Entered – 5-19-00 - sb CL 00L0315 ALEXIS HOLMES

CLAIM OF: NICHOLAS A. LOTITO

1055 Alta Avenue, NE Atlanta, Georgia30307

For vehicular damages alleged to have been sustained as a result of driving over a pothole in the road on April 9, 2000 at Colquitt Avenue West of Euclid Avenue.

BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to NICHOLAS A. LOTITO the sum of \$846.03 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for vehicular damages alleged to have been sustained as a result of driving over a pothole in the road on April 9, 2000 at Colquitt Avenue West of Euclid Avenue as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD

CITY ATTORNEY

ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

BY:

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. <u>00L0315</u>	Date: 11/2/01				
Claimant /Victim NICHOLAS A. LITITO					
BY: (Atty)(Ins.)	orgia 30307				
Subrogation: Claim for Property damage \$ 846.	03 Bodily Injury \$				
Date of Notice: 4/20/00 Method: Writte	n, proper X Improper				
Conforms to Notice: O.C.G.A. §36-33-5 X	Ante Litem (6 Mo.) X				
ate of Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X ate of Occurrence 4/9/00 Place: Colquitt Avenue West of Euclid Avenue					
Department Public Works	Division: Street Operations				
Employee involved	Disciplinary Action:				
NATURE OF CLAIM: The claimant sustained damages in the roadway incurring damages in the above amount.					
INVESTIGATION:					
Statements: City employee ClaimantX Pictures Diagrams Reports: Police _ Traffic citations issued: City Driver Citation disposition: City Driver	Other X Written Oral Dept Report Other X Claimant Driver Claimant Driver				
BASIS OF RECOMMENDATION:					
Function: Governmental	Ministerial X				
Improper Notice More than Six Months	Other X Damages reasonable X				
City not involved Offer rejected	Compromise settlement				
Repair/replacement by Ins. Co.	Repair/replacement by City Forces				
Function: Governmental More than Six Months Offer rejected Repair/replacement by Ins. Co City Negligent X	Joint Claim Abandoned				
Respectfully submitted,					
	ELLIES HOLMES				
RECOMMENDATION:					
Pay \$ 846.03 Adverse Account ch	narged: 1A01 X 2J01 2H01 2H01				
Claims Manager:	Concur/date //- 02 8/				
Committee Action:	_Council Action				

FORM 23-61

Receves 05/17/00

COUNCIL OF THE O	CITY OF ATLANTA	war in		CLAIM FOR DAMAGES	_ ~
MUNICIPAL CLERI	_	T 1		ay's Date: 4/13/2006	
City Hall	/ fo 1		Toda	ay's Date:	<u> </u>
55 Trinity Avenue, S.V	٧.				
Atlanta, Georgia 30335	;	APR 20			
· · · · · · · · · · · · · · · · · · ·	1 me 1 m	, , . <u></u> -	ENTERED -	- 5-19-00 - SB	
Dear Municipal Clerk:	:		00L0315 -	- MIKE REEVES	
	1 5 5	11 34.20	LERK	GUI	
This is to notify the Cit	of Atlanta that I have	suffered damage	s in the amount sum of S_	846.03	property
and/or \$	 bodily inju 	ry for which I con	tend the City is liable.		
	,				
1 Date of incident:	4/9/200	o 2. Time	e of Incident: 2;40 p	3. Police called: Ye	
	/month/day/ year	1			s No
	(
4 Location of incider	or (including street add	ress): C/gu.	# Ave / ast.	West of Endid	
T. Document of merce.		· 		Stest of Endid	UCAIVIIR
5 Name of your insu	rance company: 5	mhe Farm		Policy No. 16/79	73 410 110
J. Marie O. your more			. / ^ /	11 ((2	1-1 -1
6 State what and how	v incident occurred:	I had he	erned on to col	gnitt off Encl	12/ 12/
0. 5					11 2 2 2 2
drove in	la a 2 host	wide /	It does poth	ale, damaging b.	ou rims
			, 01		the su'l
and Flatte	wing boll h	res on the	a left sile of	Engent A Nei	3-001 1-101
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pulle car	hed done	he same U	my the day	betore. I replaced	7 77.13
with us	ed parts.				N A TRAC NATE I
7 ATT ESTIMATI	CS AND DAMAGES	ARE SUBJECT	10 marechon in	ID WINDLING OF THE	LAIMS WILL
RESULT IN YO	UR CLAIM BEING I	DENIED AND MA	AY RESULT IN CRIMI	NAL PROSECUTION!	
					6
8. The registered ov	ner must make the cl	aim for vehicle da	mages, complete the follo	wing and attach two (2) estimates	ates of repair and
proof of ownershi	p of your vehicle (cop)	of the current tag	receipt or title).		
•			11-1 249	(Driver's Name)	Lakto
Your vehicle:	BM W	1449	74/2 277	(Deisser's Name)	
	(Make)	(Year)	(Tag Number)	(Driver's Name)	
			. *		
City vehicle:	(Make)			(Da-t-a-a-t/Pusson)	<u> </u>
-	(Make)	(City Driver	's Name)	(Department/Bureau ans also to lA	llis uns
Yaris	us residudo en	Colgnitt W.	Wester Durs	(Telephone Number	ons tweek
9. Witness: Not	repaired her	Non L 4 MM	s. er und ja	(Talanhara Number) · · · · · · · · · · · · · · · · · · ·
	(Name)	(Address)		(Telephone Number)
10. The acknowledg	ment of this claim i	n no way waive	s the Sovereign immun	ity of the City of Atlanta	, as granted by
State law, nor is i	t an admission of liabil	ity on behalf of the	e City of Atlanta and/or its	s employee(s).	
11. This claim should	d be mailed immediat	ely to the address	s shown above.		
			· A1.	is A. Ladito	
	AR OR AFFIRM THA		17, 0170	(Print Claimant's Name)	
INFORMATION	IS TRUE AND CORE	RECT.		(Print Claimant's Name)	
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1/1× ×.				(1)	- ,
Signature of Clair	mant			(Address)	
-			AH.	A/A Are. NE (Address) (City, State and Zip Code)	
			- 71//	(City Conda)	
			,	(City, State and Zip Code)	
			4/1557	.000 4/6	594032
			1/ 500 2	land (Home)	Number)
			(Work Num	neri (NUME	i vallioci j